State of California —Health and Welfare Agency Form Approved OMB No. 2050—0039 (Expires 9-30-91)

See Instructions on Back of Page 6 and Front of Page 7

Department of Health Services
Toxic Substances Control Division

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7	WASTE MARIFEST CAD 006 19051	5 58	NO.	10 10 10 10 10 10 10 10 10 10 10 10 10 1	required by		
100000	A State Manifest Document ACCO AIR CONDITIONING				ment Number		
					88677136		
	6265 SAN FERNANDO RD, GLENDALI	B. St	B. State Generator's D				
	4. Generator's Phone (818) 244-6571						
	5. Transporter 1 Company Name 6. US EPA ID Number C. State Transporte				ID 11	0237	
1 10	OMEGA RECOVERY SERVICES GAD 042 45 001 D. Transporte				213 / 6	98-0991	
	7. Transporter 2 Company Name 8. US EPA ID Number E. State Transporter's ID						
	9. Resignated Facility Name, and Site Address OME GA RECOVERY SERVICES 10. US EPA ID Number G. State Facility's ID					\$	
The same of the sa	12504 E. WHITTIER BLVD CIAIDIOIY 2-12-14					Tagli	
	H. Facility's Phone						
	WIIIIIIM, CA 90002	1	213 698-0991				
	ALLIC DOT D	12.	Containers	13. Total	14.	1.	
The state of the s	11. US DOT Description (Including Proper Shipping Name, Hazard Class, a	and ID Number)	Іо. Туре	Quantity	Unit Wt/Vol	Waste No.	
	8. THA COURT THE ADMINISTRATION OF THE COURT	4 4000		1		221	
G	WASTE FLAMMABLE LIQUID N.O.S N.	A 1270					
E	(WASTE SPIRO OIL)	Kin	DE DIV	man) G	PA/Other	
E	b.	100	71 41	- Carolina		ate	
R						,	
Ţ				1	E	PA/Other	
DESIGNATION GENERATOR REPORTED	c.			+	S	tate	
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and a					E	PA/Other	
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,				l	E	PA/Other	
	J. Additional Descriptions for Materials Listed Above			landling Codes for	Wastes List	ad Abaya	
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	A) FOR DISPOSAL		C.		d.		
	Consideration between and Additional Information	tidassassastas dimmeneral suovilla entra disabilitati di Nobella Perturbia entra di				FERTON VENTON CONTROL COVERED NO FO	
	15. Special Handling Instructions and Additional Information						
1 18							
	PROFILE NUMBER A 15519						
	16.						
	GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and						
1 1	national government regulations.						
	If I am a large quadity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the						
'	present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste						
	generation and select the best waste management method that is av-	vailable to me and that I can af	ford.				
3	Printed/Typed Name	Signature	- 1	00		Month Day	
	C GUTES	- 11/10			1	061258	
T	17. Transporter Acknowledgement of Receipt of Materials		ones services communications	NATEURO CONTRACTOR DE LA CONTRACTOR DE L		the field of the second	
TRAN	Printed/Typed Name	Signature	11	2		Month Day	
N S P	Labert Call Call Media					06125	
	The state of the s						
ORT	Printed/Typed Name	Signature				Month Day	
		110000			1	1 1 1 1	
Ř	19. Discrepancy Indication Space	Assessment . Commission of the	man variantenderrownomsterso				
F	15. Discrepancy moreation space						
A							
C							
	20. Facility Owner or Operator Certification of receipt of hazardous mate	wide equated by the	overst	oted is there to			

DHS 8022 A (1/88)

Do Not Write Below This Line EPA 8700—22 (Rev. 9-88) Previous editions are obsolete.

White ISDE SENDS THIS COPY TO DOHS WITHIN 30 DAYS

To PO Box 3000, Sacramento, CA 95812